PTO/SB/17 (12-04v2) Approved for use through 7/31/2006. OMB 0651-0032

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Nu	ımber	09/670,455-Co	nf. #3618	
FEE TRANSMITTAL			Filing Date		September 26, 2000		
			First Named In	nventor	Peter Pothier		
For FY 2005			Examiner Nam	Examiner Name A. N. Strange			
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit	Art Unit 2153			
TOTAL AMOUNT OF PAYMENT (\$) 620.00			Attorney Docke	Attorney Docket No. 105984-0787			
METHOD OF PAYMEN	IT (check all th	nat apply)					
X Check Credit	Card M	Ioney Order N	one Other	(please iden	tify):		
Deposit Account Dep	osit Account Numb	er: 141449 Deposit A	ccount Name:	Nutte	r McClennen &	Fish LLP	
For the above-iden	tified deposit a	ccount, the Director	is hereby authoriz	zed to: (che	ck all that apply)		
	) indicated belo		<del></del>		dicated below, ex	cept for the	filing fee
	idditional fee(s 37 CFR 1.16 a	) or underpayment o	of x Cred	it any overp	ayments		
FEE CALCULATION	07 01 10 10 10 10	AIM 1.17					
1. BASIC FILING, SEARC	H. AND EXAM	INATION FEES		<del></del> · .			
	-		EARCH FEES	EXAMI	NATION FEES		
Application Tune		Small Entity	Small Entity		Small Entity	F D-	-1-1 (6)
Application Type Utility	Fee (\$) 300	Fee (\$) Fee		Fee (\$)	Fee (\$)	Fees Pa	<u>sid (\$)</u>
•		150 500		200	100		
Design ,	200	100 100		130	65		
Plant	200	100 300		160	80	<del></del>	
Reissue	300	150 500		600	300		
Provisional	200	100	0	0	0		···-
2. EXCESS CLAIM FEES Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (include				50	25		
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims Extra	Paid (\$)	<u>M</u>	ultiple Depende	nt Claims			
- 20 =	•	% - <u>Fe</u>	e (\$) <u>F</u>	ee Paid (\$)			
Indep. Claims Extra		ee (\$)Fee	Paid (\$)	<del></del>			-
-3=	× _	=					
3. APPLICATION SIZE FEI If the specification and dr listings under 37 CFR sheets or fraction there	awings exceed 1.52(e)), the a	pplication size fee of	lue is \$250 (\$125	for small e	led sequence or ontity) for each ad	computer Iditional 50	
<u>Total Sheets</u> <u>E</u>	xtra Sheets	Number of each	additional 50 or fra	action therec		Fee Pa	aid (\$)
- 100 =		/50	_ (round up to a wi	noie number)	x =		-id (6)
4. OTHER FEE(S)  Non-English Specificati	ion \$130 fee	(no small entity dia	count)			Fees P	aid (\$)
Other (e.g., late filing st		51 Extension for re		second mo	onth	225	.00
Other (e.g., late fiffing st		01 Request for co				395	
SUBMITTED BY	<b>A</b>	1.					
Signature	1/11/1	<u></u>	Registration No. (Attorney/Agent)	43,810	Telephone	(617) 439	-2000
Name (Print/Type) Reza Mo	llaaghababa				Date Aww	4 3, 7,	w 5
					• • •	<del>-, ,, _</del>	
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Fee Transmittal  I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.  Dated: Away 13, 2005 Signature: (Reza Mollaaghababa)
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